



WASHINGTON MOTOR VEHICLE FUEL BLENDER TAX RETURN

MB

Fuel Tax Section
PO Box 9048
Olympia WA 98507-9048
(360) 664-1852

A. REPORTING PERIOD Year: _____ Month: _____		FOR VALIDATION ONLY--108-030-115-0001	
B. <input type="checkbox"/> No Operations This Period <input type="checkbox"/> Amended Return <input type="checkbox"/> Late Return		<input type="checkbox"/> Name Change <input type="checkbox"/> Address Change	
C.		VALIDATED POSTMARK DATE D. Cancel License Effective Date _____	
Account #			
1 Beginning physical inventory	1		
2 Fuel received (total from Schedule A on reverse)	2		
3 Ending physical inventory	3		
4 Total accountable gallons (line 1 + line 2 - line 3)	4		
5 Tax exempt gallons (total from Schedule B on reverse)	5		
6 Taxable gallons (line 4 - line 5)	6		
7 Washington power take-off/power pumping credit gallons *	7		
8 Allowed tax-paid credit gallons (Schedule D, line D4)	8		
9 Total of motor fuel allowances (total from Schedule C on reverse)	9		
10 Net taxable or credit gallons (line 6 - line 7 - line 8 - line 9)	10		
11 Motor vehicle fuel tax (line 10 x tax rate)	11		
12 Penalty after 25th of month (line 11 x 2%)	12		
13 Sum of line 11 + line 12	13		
14 Interest (line 13 x 1%)	14		
15 Total fuel tax liability (line 13 + line 14)	15		
16 Previous payments (Amended returns only)	16	()	
17 If total of lines 15 - 16 is greater than zero, amount owed	17		
18 If total of lines 15 - 16 is less than zero, net refund amount	18	()	
EFT payment			

PLEASE RETAIN A COPY OF THIS TAX RETURN FOR YOUR RECORDS

SIGNATURE REQUIRED

I certify under penalty of perjury that this return is true, correct and complete to the best of my knowledge.

Signature _____	Title _____
Print Name _____	Date _____ Phone () _____
Contact Name _____	Phone () _____

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Name _____ Account/License no. _____

SCHEDULE A - FUEL RECEIVED

A1 Gallons purchased/received tax paid * (Copy to line D2)	A1	
A2 Gallons purchased/received non-taxed *	A2	
A3 Gallons of blend stock received/used *	A3	
A4 Other ** (explain)	A4	
Total fuel received (sum of lines A1 through A4)		

SCHEDULE B - TAX EXEMPT GALLONS

B1 Sales to Washington licensed Suppliers *	B1	
B2 Export sales to U.S. Armed Forces or National Guard *	B2	
B3 Sales to foreign governments *	B3	
B4 Own use or consumption	B4	
B5 Other ** (explain)	B5	
Total exempt gallons (sum of lines B1 through B5)		

SCHEDULE C - MOTOR FUEL ALLOWANCE

C1 Taxable gallons (line 6)	C1	
C2 Gallons purchased/received tax paid * (Copy to line D2)	C2	
C3 Total of line C1 - line C2	C3	
C4 Taxable handling allowance rate	C4	0.0031
C5 Taxable handling allowance gallons (line C3 x line C4)	C5	

SCHEDULE D - TAX PAID FUEL CREDIT GALLONS

D1 Beginning inventory tax paid fuel	D1	
D2 Gallons purchased/received tax paid * (same as Line A1)	D2	
D3 Ending inventory tax paid fuel	D3	
D4 Tax paid credit gallons on fuel distributed (line D1 + line D2 - line D3)	D4	

* Support schedule required

** One support schedule for each category required